programme is being conducted by Dr. Bimal Chhajer. There is no available evidence to show that such a programme resulted in a decline in mortality or the need of re-vascularisation surgery.

(d) No such proposal is under consideration of the Government.

बैढ़न, मध्य प्रदेश में हवाई पट्टी का निर्माण

2305. श्री जगन्नाथ सिंह: क्या नागर विमानन मंत्री यह बताने की कृपा करेंगे कि:

(क) क्या यह सच है कि बैढ़न (सिंगरौली) जिला सीधी (मध्य प्रदेश) में हवाई पट्टी निर्माणाधीन है; और

(ख) यदि हां, तो इस पट्टी के निर्माण में हुई प्रगति का ब्यौरा क्या है?

नागर विमानन मंत्री (श्री सी.एम. इब्राहीम): (क) जी, नहीं।

(ख) प्रश्न नहीं उठता।

Reimbursement of the cost of Pacemaker to C.G.H.S, beneficiaries

2306. SHRI RAJUBHAI A. PARMAR: SHRIMATI VEENA VERMA: SHRI SUSHILKUMAR SAMBHAJIRAO SHINDE:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to refer to the answer to Unstarred Question No. 351 given in the Rajya Sabha on February 29, 1996, and state:

(a) whether Government have since decided to reimburse to C.G.H.S, beneficiaries, the full cost of a pacemaker implanted on is person or his dependent;

(b) if so, the precise decision taken in the matter;

(c) the reasons for denying the full cost of reimbursement in respect of such a pacemaker, when such implantation is considered essential and the cost is reasonable and competitive;

(d) whether any representations received through Members of parliament have been pending for over a year and a half for full and fair reimbursement of the cost of pacemaker implanted; and

(e) if so, the decision taken thereon?

THE MINISTER OF STATE OF THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI SALEEM IQBAL SHERVANI) (a) to (e) The Govemment have since revised the rates of pacemakers and the reimbursement is made as per the ceiling of the costs fixed or the actual cost of pacemaker, whichever is less. The revised rates, effective from 12.6.96, have been fixed keeping in view the market rate of pacemakers. Thus, the reimbursement of the actual cost of pacemaker is met to a large extent.

Governments shifting from demographic target to mother and child care facilities

2307. SHRI S. AUSTIN: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government have shifted from demographic targets to mother and child care facilities;

(b) whether the shift has brought about any change in the attitude of those opposed to family planning on grounds of orthodoxy and rigidity in views; and

(c) if so, to what extent?

THE MINISTER OF STATE OF THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI SALEEM IQBAL SHERVANI): (a) to (c) The system of setting contraceptive targets from the top has been replaced by a system of decentralised participatory planning at the Primary Health Centre level with effect from 1st April, 1996. The decentralised planning will take into account the needs of the community for Family Welfare services including mother and child care. This process is expected to bring improvement in quality and greater acceptance of services.

Installation of New High Power T.V. Transmitters in Gujarat

2308. SHRIMATI URMILABEN CHIMAN
BHAI: Will the Minister of INFORMATION AND BROADCASTING be pleased to state:

(a) the number of new high power T.V. transmitter centres proposed to be installed in Gujarat;

(b) the amount earmarked for installation of these T.V. transmitter centres, Centre-wise;

(c) by when these are likely to start functioning; and

(d) the progress made so far in this regard?

THE MINISTER OF INFORMATION AND BROADCASTING (SHRI CM. IBRAHIM): (a) Besides High Power TV transmitter (permanent set up) at Bhuj, which is presently under implementation in Gujarat, 5 other locations in the State have been tentatively identified for installation of HPTs subject to availability of funds, other infrastrucural facilities and inter-se priorities.

(b) The revised approved capital cost of the HPT, Bhuj is Rs. 875.07 lakhs. The other 5 projects have still to be approved by the competent authority.

(c) and (d) While HPT, Bhuj (permanent set up) is expected to be completed during 1998, the other proposed schemes are expected to be completed in about 4 years' time from the date of sanction of the scheme by the competent authority.

DI effects of PEM on Children's eye-sight

2309. SHRI LACHMAN SINGH: Will the Minister of HEALTH. AND FAMILY WELFARE be pleased to state:

(a) whether PEM (Protein Energy Malnutrition) among the people in the country has increased;

(b) the number of children affected by night blindness, a disease caused by Vitamin A deficiency; and

(c) the steps taken to prevent PEM among the children from the poor section of the society?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI SALEEM IQBAL SHERVANI): (a) No, Sir.

(b) The number oc children affected by night blindness because of vitamin A deficiency is not available. However, surveys carried out by National Nutrition Monitoring Board using prevalence of Bitot spot as an indicator of vitamin A deficiency have shown a decrease from 1.8% in 1975-79 to 0.7 in 1988-90.

(c) The steps taken to prevent PEM among children include provision of supplementary nutrition through ICDS, Mid-day meal programme, provision of Vitamin A and Iron Folic Acid tablets under the Child Survival and Safe Motherhood Programme, National Iodine Deficiency Programme, Pilot Programme for control of Micronutrient mal-nutrition, promotion of exclusive breast feeding and nutrition education. Empowerment of women through facilitating formation of self help groups at village level aimed at income generation leading to better capacity for higher nutrition are some of the additional steps in this direction.

Deficit financing of the Budget

2310. SHRI MOHINDAR SINGH KALYAN: Will the Minister of FINANCE be pleased to state:

(a) the details of deficit financing of the budget during the last three years;

(b) whether it is a fact that there has been an increase in deficit financing during this period;

(c) if so, the reasons therefor; and

(d) the action proposed to be taken by Government to decrease and improve the position of deficit financing of the budget?

THE MINISTER OF FINANCE (SHRI P. CHIDAMBARAM): (a) and (b) The details of budget deficit which represents excess of total expenditure (both revenue & capital) over total receipts (both revenue & capital) for the last three years are as under:-

	(Rs. in crore)
1993-94	10960
1994-95	961
1995-96 (RE)	7600

(c) and (d) Need for deficit financing of the budget arises due to excess of total expenditure over total receipts and is met by issue of 91 day Treasury Bills and draw down of cash balance. Budget deficit for 1996-97(BE) has been estimated at Rs. 6578 crore. Government will endeavour to contain the budget deficit in the current year by increasing receipts and controlling expenditure.

Foreign exchange outlay incurred by companies operating satellite TV channels

2311. SHRI R.K. KUMAR: Will the Minister of FINANCE be pleased to state:

(a) the total foreign exchange outlay